ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY



170

SW-03841A Mountain Pass Utility Company 9532 E. Riggs Road Sun Lakes AZ 85248

APR 1 5 2005

ANNUAL REPORT

FOR YEAR ENDING

12 31 2004

FOR COMMISSION USE

ANN05

04

COMPANY INFORMATION

Λ	n D (11)	110	
Company Name (Business Name)	lountain lass Uti	lity Company	<u></u>
Mailing Address 9532 E Ric	ras Road		
Mailing Address 9532 ERIC Sun Lakes (Street)	AZ	852 ((Zip)	48
(City)	(State)		,
(480) 895-9200	(480)895-434	7	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (I	nclude Area Code)
Email Address			
Local Office Mailing Address 40,00 (Str. (City)	14 S Ridge VIPW	BIVL	
(Str	reet) A2	8573	3
Tucson (Sit	(State)	(Zip)	
(520) 825-3423	(520) 825-07/2	(520) 93	32-5892
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (1	include Area Code)
Email Address			
MANA	GEMENT INFORMAT	<u>ION</u>	
Management Contact: Ja	mes Poulos	General	Manager
9532 E Riggs Rl	Sun Lakes	AZ	Manager 85248
(480) 895-9200	(U80) 895-4347	(State)	(Zip)
Felephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Inclu-	de Area Code)
Email Address		-	
On Site Manager: EQ Ma	c Means		
40,004 S Ridgeview Bli		17	9/1100
40,004 S Ridgeview DI	/ / / / / / / / / / / / / / / / / / / /	/+ <i>E</i>	05'137
(Street)	(City)	(State)	(Zip)
(Street) (520) 825-5515	_ (0.9)	(State) (520) 930	(Zip) -5892
(Street) (520) 825-5515 Telephone No. (Include Area Code)	(City) (520) 825-0712 Fax No. (Include Area Code)	(State) (520) 932. Pager/Cell No. (Include	-5892
(520) 825-5515 Telephone No. (Include Area Code)	(520) 825-0712	(520) 932	-5892
(520) 825-5515	(520) 825-0712	(520) 932	-5892

Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: FC Service	Corporation	
3003 N antral Auc#26	00 Phyenix	AZ 85012 (State) (Zip)
(Street) (602) 916-5000 Telephone No. (Include Area Code)		Pager/Cell No. (Include Area Code)
Attorney: Marty Aranson	(Name)	
One E Came I back Road	Phoenix	AZ 85012 (State) (Zip)
(602) 263-2972		(C.II.M. (Include Acc Code)
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Please mark this box if the above addres OWNER	s(es) have changed or are updates SHIP INFORMATION	ted since the last filing.
Check the following box that applies to your co	ompany:	
Sole Proprietor (S)	C Corporation (C) (Otl	her than Association/Co-op)
Partnership (P)	Subchapter S Corpora	tion (Z)
Bankruptcy (B)	Association/Co-op (A)	,
☐ Receivership (R)	Limited Liability Comp	pany
Other (Describe)		
<u>co</u>	UNTIES SERVED	,
Check the box below for the county/ies in which	ch you are certificated to provide	service:
□ АРАСНЕ	☐ COCHISE	☐ COCONINO
☐ GILA	☐ GRAHAM	GREENLEE
☐ LA PAZ	☐ MARICOPA	☐ MOHAVE
☐ NAVAJO	☐ PIMA	PINAL
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUMA
☐ STATEWIDE		

UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	
No.	DECRIPTION	Cost	Depreciation	O.C.L.D.
		(OC)	(AD)	(OC less AD)
351	Organization			
352	Franchises			
353	Land and Land Rights			
354	Structures and Improvements			
355	Power Generation Equipment			
360	Collection Sewers - Force			
361	Collection Sewers – Gravity			
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations			
370	Receiving Wells			
380	Treatment and Disposal Equip.			
381	Plant Sewers			
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment			
390	Office Furniture and Equipment			
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.			
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			
	TOTALS	0	0	0

This amount goes on the Balance Sheet Acct. No. 108 ——

CALCULATION OF DEPRECIATION EXPENSE

Acct.	DESCRIPTION	Original Cost (1)	Depreciation Percentage	Depreciation Expense (1x2)
INO.	DESCRIPTION	Cost (1)	(2)	Expense (1x2)
351	Organization			
352	Franchises			
353	Land and Land Rights			
354	Structures and Improvements			
355	Power Generation Equipment			
360	Collection Sewers – Force			
361	Collection Sewers - Gravity			
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations			
370	Receiving Wells			
380	Treatment and Disposal Equip.			
381	Plant Sewers			
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment			
390	Office Furniture and Equipment			
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.			
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			
	TOTALS	O	0	-0-

This amount goes on the Comparative Statement of Income and Expense Acct. 403

BALANCE SHEET

Acct		BALANCE AT BEGINNING OF	BALANCE AT END OF
No.	ASSETS	TEST YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$	\$
132	Special Deposits		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS		
		\$	\$
	FIXED ASSETS		
101	Utility Plant in Service	\$	\$
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$	\$
	TOTAL ASSETS	\$ A	\$ 0

NOTE: Total Assets on this page should equal Total Liabilities and Capital on the following page.

BALANCE SHEET (CONTINUED)

Acct	LIABILITIES	BALANCE AT BEGINNING OF TEST YEAR	BALANCE AT END OF YEAR
No.	LIADIDITIES		
	CURRENT LIABILITES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$	\$
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
	DEFERRED CREDITS		
252	Advances in Aid of Construction	\$	\$
253	Other Deferred Credits		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$	\$
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Other Paid in Capital	*	
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$	\$
	TOTAL LIABILITIES AND CAPITAL	\$ 0	\$ 0

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
No.			
521	Flat Rate Revenues	\$	\$
522	Measured Revenues		
536	Other Wastewater Revenues		
	TOTAL REVENUES	\$	\$
	OPERATING EXPENSES		
701	Salaries and Wages	\$	\$
710	Purchased Wastewater Treatment		
711	Sludge Removal Expense		
715	Purchased Power		
716	Fuel for Power Production		
718	Chemicals		
720	Materials and Supplies		
731	Contractual Services – Professional		
735	Contractual Services – Testing		
736	Contractual Services - Other		
740	Rents		
750	Transportation Expense		
755	Insurance Expense		
765	Regulatory Commission Expense		
775	Miscellaneous Expense		
403	Depreciation Expense		
408	Taxes Other Than Income		
408.11	Property Taxes		
409	Income Taxes		
	TOTAL OPERATING EXPENSES	\$	\$
	OTHER INCOME/EXPENSE		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	TOTAL OTHER INCOME/EXPENSE	\$	\$
	NET INCOME/(LOSS)	\$ -0-	\$ 0

SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1		LOAN #2	LOAN #3	LOAN #4	
Date Issued						
Source of Loan						
ACC Decision No.						
Reason for Loan						
Dollar Amount Issued	\$	\$		\$	\$	
Amount Outstanding	\$	\$	1	\$	\$	
Date of Maturity						
Interest Rate		%	%	%		<u>%</u>
Current Year Interest	\$	\$		\$	\$	
Current Year Principle	\$	\$,	\$	\$	

COMPANY NAME	ΔΛ	7)	11.1.1.7	0.
COMPANT NAME	Mountain	Pacs	Utility	Company
	7 . 0		(

WASTEWATER COMPANY PLANT DESCRIPTION

TREATMENT FACILITY

TYPE OF TREATMENT	ti Ovidation	_			
Extended Aeration, Step A. Ditch, Aerobic Lagoon, Ana	eration, Oxidation	(1			
Trickling Filter, Septic Tank	k Wetland Etc.)				
DESIGN CAPACITY OF	PLANT			10	
(Gallons Per Day)		Ì			
	LIFI	STATION	FACILITIES		
Location		Quantity of Pumps	Horsepower Per Pump	Capacity Per Pump (GPM)	Wet Well Capacity (gals)
		FORCE :	MAINS		
Size		Materi	ial	Le	ngth (Feet)
4-inch					
6-inch					
	MANHOLES	<u>S</u>		CLI	EANOUTS
Туре		Quantity	7		Quantity
Standard					
Dron	1				

WASTEWATER COMPANY PLANT DESCRIPTION (CONTINUED)

COLLECTION MAINS

SERVICES

Size (in inches)	Material	Length (in feet)
4		
6		
8		
10		
12		
15		
18		
21		
24		
30		

Size (in inches)	Material	Quantity
4		
6		
8		
12		
15		

FOR THE FOLLOWING FIVE ITEMS, LIST THE UTILITY OWNED ASSETS IN EACH CATEGORY

SOLIDS PROCESSING AND HANDLING FACILITIES	
DISINFECTION EQUIPMENT (Chlorinator, Ultra-Violet, Etc.)	
FILTRATION EQUIPMENT (Rapid Sand, Slow Sand, Activated Carbon, Etc.)	
STRUCTURES (Buildings, Fences, Etc.)	
OTHER (Laboratory Equipment, Tools, Vehicles, Standby Power Generators, Etc.	

COMPANY NAME	Mountain	Pass	Utility	Compan	4

WASTEWATER FLOWS

MONTH/YEAR (Most Recent 12 Months)	NUMBER OF SERVICES	TOTAL MONTHLY SEWAGE FLOW	SEWAGE FLOW ON PEAK DAY

PROVIDE THE FOLLOWING INFORMATION AS APPLICABLE

Method of Effluent Disposal (leach field, surface water discharge, reuse, injection wells, groundwater recharge, evaporation ponds, etc.)	
Wastewater Inventory Number (all wastewater systems are assigned an inventory number)	
Groundwater Permit Number	
ADEQ Aquifer Protection Permit Number	
ADEQ Reuse Permit Number	
EPA NPDES Permit Number	

STATISTICAL INFORMATION

Total number of customers	Ð	
Total number of gallons treated	0	gallons

COMPANY NAME Mountain Pass Utility Company YEAR ENDING 12/31/200

INCOME TAXES

For this reporting period, provide the following	:
Federal Taxable Income Reported Estimated or Actual Federal Tax Liability	0
State Taxable Income Reported Estimated or Actual State Tax Liability	
Amount of Grossed-Up Contributions/Advances	s:
Amount of Contributions/Advances Amount of Gross-Up Tax Collected Total Grossed-Up Contributions/Advances	
close of the tax year when tax returns are com are due to any Payer or if any gross-up tax information by Payer: name and amount of co	lity will refund any excess gross-up funds collected at the apleted. Pursuant to this Decision, if gross-up tax refunds refunds have already been made, attach the following ntribution/advance, the amount of gross-up tax collected, he date the Utility expects to make or has made the refund
CERTIFICATION	
in the prior year's annual report. This certific	y has refunded to Payers all gross-up tax refunds reported cation is to be signed by the President or Chief Executive al partner, if a partnership; the managing member, if a , if a sole proprietorship.
SIGNATURE	04-13-05 DATE
James Powlos	General Manager

COMPANY NAME MOUNTain Pass Utility Company YEAR ENDING 12/31/2004

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2004 was: \$
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.
If no property taxes paid, explain why.

VERIFICATION AND

SWORN STATEMENT

Intrastate Revenues Only

APR 15 2005

STATE OF A 1 ZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)

MACICUPA

NAME (OWNER OR OFFICIAL) TITLE

TAMPS POULOS GENERA MANAGER

COURANY NAME

MOUNTAIN PASS Utility COMPANY

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR
12 31 2004

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE</u> UTILITY OPERATIONS DURING <u>CALENDAR YEAR 2004 WAS:</u>

SIGNATURE OF OWNER OR OFFICIAL

Arizona Intrastate Gross Operating Revenues Only (\$)

(THE AMOUNT IN BOX ABOVE INCLUDES \$______ IN SALES TAXES BILLED, OR COLLECTED)

**REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

MY COMMISSION EXPIRES JUNE

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

OFFTRAL SEAL

LINDA A. SCHWARTZ

NOTARY PUBLIC - State of Arizona

MARICOPA COUNTY

My (Shirif) Expires June 19, 2008

MONTH APRIL , 2005

SIGNATURE OF NOTARY PUBLIC

VERIFICATION AND **SWORN STATEMENT RESIDENTIAL REVENUE**

APR 1 5 2005

VERIFICATION	INTRASTATE REVENUES ONLY
STATE OF Arizona	COUNTY OF (COUNTY NAME) Maricup a
I, THE UNDERSIGNED	NAME (OWNER OR OFFICIAL) Tames Poulus TITLE General Managen
OF THE	COMPANY NAME Mountain Pass Utility Company
DO SAY THAT THIS ANNUA	L UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION
FOR THE YEAR ENDING	MONTH DAY YEAR 12 31 2004
PAPERS AND REC THE SAME, AND STATEMENT OF COVERED BY THE SET FORTH, TO TO SWORN STATEMENT IN ACCORDANCE	ARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, CORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED DECLARE THE SAME TO BE A COMPLETE AND CORRECT BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD S REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING HE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS
OPERATING REV	ENUE OF SAID UTILITY DERIVED FROM <u>ARIZONA INTRASTATE</u> FIONS <u>RECEIVED FROM RESIDENTIAL CUSTOMERS DURING</u>
ARIZONA INTRASTATE GROSS	OPERATING REVENUES (THE AMOUNT IN BOX AT LEFT INCLUDES \$ IN SALES TAXES BILLED, OR COLLECTED
*RESIDENTIAL REVENU MUST INCLUDE SALES	E REPORTED ON THIS PAGE TAXES BILLED. X SIGNATURE OF OWNER OR OFFICIAL (480) 895-9200 TELEPHONE NUMBER
SUBSCRIBED	AND SWORN TO BEFORE ME NOTARY PUBLIC NAME LINDS A. Salvartz
MY COMMISS	ION EXPIRES June 19, 2008 SIGNATURE OF NOTARY PUBLIC

FINANCIAL INFORMATION

Attach to this annual report a copy of the companies' year-end (Calendar Year 2004) financial statements. If you do not compile these reports, the Utilities Division will supply you with blank financial statements for completion and filing. <u>ALL INFORMATION MUST BE ARIZONA-SPECIFIC AND REFLECT OPERATING RESULTS IN ARIZONA.</u>

No Financials issued for 2004